

## PART B - FEE(S) TRANSMITTAL

or <u>Fax</u> (571)-273-2885

Melissa L.B.



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7590

04/11/2006

Konstantinos Andrikopoulos, J.D., Ph.D. Transkaryotic Therapies, Inc. 700 Main Street Cambridge, MA 02139

07/05/2006 FFANAEI1 00000019 08465596

01 FC:1501

1400.00 DP

APPLICATION NO. FILING DATE

FIRST NAMED INVENTOR RICHARD F. SELDEN

ATTORNEY DOCKET NO. 9515

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Date)

2132

CONFIRMATION NO.

08/465,596 06/05/1995 TITLE OF INVENTION: TRANSKARYOTIC IMPLANTATION

APPLN, TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	NO \$1400		\$0	\$1400	07/11/2006
EXAMINER		ART UNIT		CLASS-SUBCLASS		
CROUCH, DEBORAH		1632		424-093210		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the na or agents (2) the na registered 2 registered	nting on the patent front page, li- mes of up to 3 registered paten OR, alternatively, me of a single firm (having as a attorney or agent) and the nam and patent attorneys or agents. If name will be printed.	nt attorneys 1 Wolf member a 2 Sack es of up to	, Greenfield as, P.C.
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Shire Human Genetic Therapies, Inc.  Cambridge, MA  Please check the appropriate assignee category or categories (will not be printed on the patent):						
	enclosed: small entity discount permitte f Copies	d)	☐ Payment	Fee(s): in the amount of the fee(s) is en- by credit card. Form PTO-2038 ctor is hereby authorized by characters. Number 23/28	is attached.	dit any overpayment, to a copy of this form).
a. Applicant claims S	(from status indicated above MALL ENTITY status. See is requested to apply the Issurablication Fee (if required) w	37 CFR 1.27.		ant is no longer claiming SMAI  y) or to re-apply any previously other than the applicant; a regi		
Authorized Signature  Typed or printed name	Michael T.	Siekman		Date	500 30,000. 036,276	200Ce
This collection of informati an application. Confidential submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. pplication form to the USPT's for reducing this burden, shinia 22313-1450. DO NOT 5-1450.	11. The information 122 and 37 CFR 1 3. Time will vary ould be sent to the SEND FEES OR C	n is required 1.14. This coldepending up Chief Information Completes COMPLETED	to obtain or retain a benefit by the lection is estimated to take 12 moon the individual case. Any contain Officer, U.S. Patent and Department of THIS ADDRESS	ne public which is to file (and ninutes to complete, including mments on the amount of the Irademark Office, U.S. Dept. SEND TO: Commissioner	i by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,

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Docket No.: T0541.70000US06

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Richard F Selden

Serial No.:

08/465596

Confirmation No.:

2132

Filed:

June 5, 1995

For:

TRANSKARYOTIC IMPLANTATION

Examiner:

D. Crouch

Art Unit:

1632

Certificate of Mailing Under 37 CFR 1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: June 30, 2006

## TRANSMITTAL LETTER

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

1. Part B – Issue Fee Transmittal

Our check in the amount of \$1400.00 covering the required issue fee is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 23/2825, under Docket No. T0541.70000US06. A duplicate copy of this paper is enclosed.

Dated: June 30, 2006

Respectfully submitted,

Michael T. Siekman

Registration No.: 36,276

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